ARIZONA STATE DEPARTMENT OF HEALTH DIVISION OF VITAL STATISTICS									
AMENDMENT TO VITAL RECORD									
Identifying information about the registrant as it appears on the original record:									
A	. Name of Registran	coletti	<u>letti</u>			B. File No. 127			
C	. Date { Birth	April MONTH	22 	1916 YEAR	D. Place		ila	Globe	
	E. ITEM ON CERTIFICATE			F. ENTRY BEFORE AMENDMENT			G. ENTRY AFTER AMENDMENT		
1	Registrant's	Kate C	Kate Giacoletti			Katherine Giacoletti			
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H. ABSTRACT OF SUPPORTING DOCUMENTS									
1.	Personal Affi					4-5-67	DATE ORIG. ENTRY		
	Registrant's Name: Katherine Giacoletti								
2.	Personal Affidavit: Father-in Joseph				Falbo			10-67"	
	Registrant's Name: Katherine Giacoletti								
3.	Son. Cochise County S.F. #59 R. B. Durfee, Regis					trar	8-31-55	B-16-37	
	Registrant's Name: Katherine Giacoletti								
4.	TYPE OF DOCUMENT BY WHOM ISSU				AND SIGNED		DATE ISSUED	DATE ORIG. ENTRY	
	INFORMATION CONCERNING REGISTRANT IN DOCUMENT								
I hereby certify that I have examined the documents referred to above and that the abstract is true and correct.									
	REGISTRAR'S CERTIFICATION	STATE REGIST	RAR		IDENCE REVIEN	VED BY	DATE FILED		
		George A.	Spendlove	, M.D.	cahea W	ane 1)	Apri	1 13, 1967	